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INAUGURAL ADDRESS.

GENTLEMEN,—I stand before you this evening with very mingled feelings—of pride and of fear ! I am only mortal, therefore the first sentiment is excusable, and, I venture to say, justifiable, for it would be but a poor compliment to you, and to the members of this Society, whose suffrages have placed me in this exalted position, if I did not express in the fullest way my heartiest thanks for the honour you have done me in electing me your Thirty-first President.

It has been quaintly said that “Vanity is merely respect for the good opinion of others,” and Narcissus himself was not more vain than I, if my vanity is to be measured by the respect I have for your good opinion !

I spoke also of fear, and that, perhaps, is almost as strongly developed as the other amiable virtue. Fear may be defined—though, perhaps, not in the dictionaries—as “a strong desire to be in two places at once.” You will see the appropriateness of the definition. One place, of course, is this honourable chair ; the other—anywhere else ! At this moment, when I speak of fear, it is as a noun of multitude ; fear lest I may not be able to give an address worthy of the occasion ; fear lest this session may be deficient in mental pabulum ; fear lest you have over-estimated my capabilities to worthily fill the position which it has been one of the ambitions of my life to occupy. And now that it is attained, I feel the responsibility of maintaining the prestige of this Society is a very heavy one. Fortunately, however, this responsibility is shared by the Council, and

by the Society itself; and, with the strong Council and the energetic Secretaries, I can only hope that we may have a very interesting and instructive series of meetings.

It is here, at least, fitting to allude to the fact that the Annual Meeting of the British Dental Association will be held in London this year, and we shall have the privilege of welcoming our *confrères* from all parts of the kingdom.

The Metropolitan Branch of the British Dental Association has also been established, and we look with pride upon the new-born offshoot of the Dental Societies with the hope that its career may be prosperous, as it cannot fail to be if it follows the traditions of its parent and grandparent, and provided the strong leaven of *fin de siècle* is not allowed to predominate.

There is ample field for this new branch to discuss dental politics and ethics and new methods of practice, but I should be failing in my stern duty as your President if I did not express the hope that members of the Society, who are also members of the Metropolitan Branch, will present their scientific and other work before this Society.

Gentlemen, we do not want this Society to be the Odontological Society of London, but of Great Britain, and I trust we may have papers and casual communications from all parts of the kingdom as well as from London. It must always be a fact that this Society has the distinction of a *genus loci*, and its Library and Museum are the store-houses of the results of progress and contain the stepping-stones over which the science of dentistry advances, and while the Society attracts the picked men all over the country, it radiates the effect of their good work in equal proportion.

Donations to our Museum are always acceptable, and it is of the utmost importance that this museum should maintain its high standard of efficiency ; and the marvellous display in Dublin in 1888 shows the store of valuable specimens in the hands of members of our Societies, and I trust the day is not far distant when all these specimens will find their way into our Museum. I should then be prepared to advocate the transportation of selected duplicate specimens on loan to every city or town where the British Dental Association may hold its Annual Meeting, so that in the first place a selection should be made by the Curator, and secondly, that any donor should have the right of requesting his specimens to be lent to the annual meeting of the British Dental Association.

It is certain, of course, that a certain risk is run of breakage and loss, but I think a special case might be designed which would carry the specimens with safety, and with efficient organisation there is no reason why we should not follow the example of those gracious people who lend their pictures and other interesting valuables to Exhibitions all over the kingdom. Then we have our library ; it is a very good one, but I do not think it is quite perfect—I should like our library to possess every single work on dental matters produced throughout the civilised world in an orthodox manner, and I trust our Council will be able to adopt this policy through its librarian.

The advantage of specialism in scientific work is a point which is hotly debated, but whilst one could enlarge upon this topic, I must content myself with another definition of what specialism may be taken to mean. It surely means that it is the result attained by a liberal education

being brought to bear upon the experience gained by constant practice of some department of study for which the individual has a natural or acquired aptitude.

To put it in another way, when a man has gone through a course of general study, he finds probably that the bent of his inclination leads him to pay more attention to one subject than the others, and it is obvious that if he works at this subject steadily—collects evidence of what has already been done—takes every opportunity of repeating these experiences, and of dealing with the matter in his own way, surely the aggregation of these data must result in his being able to deal with, and, if necessary, to treat cases which fall within the scope of his training.

All this, no doubt, is very trite, but depend upon it that as time goes on and as civilization increases, specialism will cease to be a term of reproach and become the ambition of many earnest students in all branches of science. Surely the paths of literature may be taken as an illustration, when we find historians, poets, dramatists, novelists and journalists, usually sharply enough defined, and successful most when devoting their energies to one or other of these subjects entirely.

Darwin said: "It seems to me that an hypothesis is developed into a theory solely by explaining an ample lot of facts!" Gentlemen, may we not add to this—that theories become facts by the accumulation of instances in which theories are verified by their constant repetition in exact analogy,—and is not specialism the natural sequence?

Genius has been defined as the art of doing one thing superlatively well, and I think success may be defined as

the art of doing everything rather better than is actually requisite !

Depend upon it success in life, whether socially or in the exercise of one's daily duties, can never be secured in full, if one only does just enough

“ To earn a night's repose.”

The measure must be “ pressed down and running over ! ”

It is interesting to look back to the last year or two to mark the progress which has taken place in our calling, and to note especially in its literature the new books and new editions which show the activity and energy ungrudgingly thrown into their labour by those who are endowed with the enviable gift of literary skill.

Then again, much good work has been done in the practical work, and it is remarkable that these efforts have been chiefly directed to the alleviation of pain in dental operations, and there is no field in medical or surgical practice more worthy of cultivation than the humane practice of our art.

We have fruitful and instructive discussions on anæsthetics, the introduction of gas and oxygen as a safe means of prolonged administration—further results in the successful use of bromide of ethyl. Then again, cocaine has been found by many to be capable of successful use as a local anæsthetic, though the record of some difficulties, make one reflect if it is as useful as nitrous oxide.

We have also had the record of experiments in hypnotism successfully tried for painless extraction of teeth, but I only mention this in order to offer an expression of my personal conviction that it is a method which should be employed—

if employed at all—under the most stringent conditions, and with the greatest care. In fact I would almost go so far as to say that I do not consider that it is a legitimate means of securing immunity from pain, as it is inapplicable to a normally healthy subject.

I would endorse most emphatically the resolution passed by the Psychological Section of the British Medical Association in Birmingham last year, condemning the use of hypnotism as a mere amusement, and calling for a committee of enquiry into its true nature.

I witnessed in Birmingham some very interesting and convincing experiments as to the possibility of reducing patients to the hypnotic condition, but the impressions they conveyed were those of humiliation, and extreme pity for the debased condition of the subjects whilst in the hypnotic sleep. The conclusion I arrived at, after very careful observation, was that the mesmeric power could only be exercised by individuals upon a really small percentage of patients, and therefore this could not be available for all operators and all patients, so that the exceptional cases capable of this effect being produced, would not really be of any universal service, besides which one could not but ask the question, as to what will be the future condition of the patients, who thus allow their mental state to be abrogated at the power of a stronger will.

I do not for one moment deny the potentiality of hypnotism, but I maintain most earnestly that whilst its effects may possibly be salutary in a few isolated cases, I consider that the state should only be produced in the presence, and with the full sanction, of a medical man, as well as that of the patient.

But still more strongly do I doubt the justifiability of hypnotism being exercised for the purposes of the operations in dental surgery, so long as we maintain the present average of success in the use of nitrous oxide "gas."

The influence of the latter is purely toxic, whereas hypnotism calls into play both mental and moral phenomena, which are degrading to the patient and dangerous to the operator.

In taking this emphatically antagonistic stand, I trust I shall receive the support and countenance of my fellow members of the Odontological Society of Great Britain.

Before discussing the subject of local and general anæsthetics, I should like to emphasize again my faith in nitrous oxide, believing as I do that when pure, and administered skilfully, we are using the very safest and most legitimate means of mercifully sparing our patients the shock of painful operations, and with ether of course its effects are prolonged.

For the most serious and prolonged dental operations we have an auxiliary in chloroform, which we could not do without; but it must be looked upon as a *dernier ressort*.

It is only right to mention that efforts are now being made to revive the use of Faradic electricity in securing painless extraction of teeth, but the experiments at present are in too crude a state to admit of their recognition. In the former use of this agent, the electric current was passed entirely through the forceps to the teeth, whereas the more recent method requires that the patient shall hold the terminals of the battery in each hand, whilst a third wire, attached to the handle of the forceps, diverts a portion only of the current through the tooth to be extracted, the

circuit only being completed at the moment of extraction.

With the great activity manifested on all sides in the development of electric lighting, it is only natural that dental practitioners should eagerly avail themselves where possible of this beautiful and healthful light, but so far the practical application of a mouth lamp is surrounded by difficulty.

It is essential to keep the light out of the eyes, both of patient and of operator, whilst at the same time the contrast between the light thrown into the mouth and that thrown on the instrument cabinet shall not be too great, for the sudden transitions from brilliant light to semi-darkness are much too trying to vision ; therefore, it is essential to strive for the double illumination. I have ventured to bring this evening a mouth-lamp which, in my own experience, has proved fairly successful, and I have much pleasure in showing it, in the hope that it may lead to further improvements in this very desirable direction.

Having so far glanced briefly at the modern literature of our subject during the last year or two, and at the means for alleviating suffering, let us now glance at the enormous strides which have been made in the use of the roots of teeth for carrying artificial substitutes. A more scientific knowledge of the power of antiseptic agents has rendered it possible to make healthy the roots of teeth which a few years ago would have been condemned as useless, but I should like to call attention to a book by M. de Chemant, dated 1816, which contains an illustration of an appliance carrying ten artificial teeth on a narrow plate, adapted and fixed by four pins fastened in the roots of four teeth.

Truly there is nothing new under the sun !

It is cheering indeed to watch the efforts which are being made to produce fillings and inlays for incisors which shall imitate the natural colour and consistence of the natural teeth, rather than disfiguring them by elaborate and extensive displays of gold; and the inlays of ivory, of porcelain, and of glass seem to indicate that in the near future we shall have a most natural, lasting, and artistic means of treating extensive caries in incisors, canines and bicuspid.

Mention has been made of the progress of antiseptic dental surgery, and it is not necessary to dilate upon the details of the various agents which may be used in carrying out this most desirable method of practice, as so much has been written to such good purpose on this subject.

I would, however, ask the members of this Society to give their attention to the use of oxygen gas in the treatment of septic roots and of alveolar abscess, as I have made a few experiments which seem to indicate that we have in oxygen gas a therapeutic agent of the greatest value as an oxydising agent. I find it is possible to use the compressed oxygen now so easily obtainable, by fixing a small india-rubber tube to a small expansible net-covered bag at the outlet of the gas bottle, and slipping the india-rubber tube on to the nozzle of the injection needle of a hypodermic syringe. In this way it is possible to use pure oxygen in a variety of ways in the treatment of roots and abscesses, but my experience so far has been small, and I trust the idea may be carried out experimentally by those to whom the suggestion may commend itself.

Our Society very justly taboos political discussion and controversial matter, but it would not be fulfilling the

object of its initiation if we failed to be interested in dental education.

The recent alterations in the curriculum afford much scope for reflection, and a quotation from the first introductory address ever given before the Society makes us ask ourselves whether its aspirations have been realised.

The late Mr. Cartwright, in 1856, said:—"It cannot be doubted that a liberal education is of the greatest value to those engaged in practice; and the more education is extended in all ranks of society the more it becomes necessary that the members of our profession qualify themselves as highly as they can; for those who employ the services of the dentists in these days have a right to look, and do look, to the qualifications of the mind, as well as to the mechanical adroitness of the fingers."

Then again Mr. Cartwright said of the dental diploma: "A recognised connection with the College of Surgeons is best calculated to raise the status of the dentist to an equality with other medical practitioners, and rescue our profession from the anomalous position it has hitherto held. It is my opinion," said he, "that any attempt to separate dental surgery from the profession of surgery is impolitic in the extreme."

"By allying ourselves to the parent institution, the College of Surgeons, we must hold a proper position as professional men, while our status, I think, could not but be lowered by any scheme which involves a voluntary separation from that body."

Now, gentlemen, we must admit that Mr. Cartwright's views expressing, as they did, the opinions of those who gained for us the charter granting the L.D.S. diploma, have

in great measure been more than realised, and it is in our hands to maintain the prestige of that diploma, and by constantly raising the standard of the curriculum and examination, in harmony with medical education, we shall best be carrying out and emphasising the policy laid down for us in those early days.

I find amongst the names on the Council of the Odontological Society in 1856 those of John Tomes, Edwin Saunders, Thomas Arnold Rogers, Samuel Cartwright, G. A. Ibbetson and Henry Barrett, and we cannot but feel our hearts beat in unison with theirs in the exaltation they must feel in the proud realisation of their well-won victory, the L.D.S. diploma.

As to what must be our future course, and what we must do to enhance the value of our inheritance, I do not venture to propose on this occasion ; I can only earnestly and sincerely as President of this Society offer to these gentlemen and others who worked with them, an expression of our gratitude and appreciation.

Glancing over the records of this Society, and of the scientific and literary work done by its members, we have just reason to be proud, and we have a stimulus given us to carry on the good work, and I am not one of those who consider that the "Caucasian is played out," as far as the scientific aspect of our profession is concerned. There are many problems yet to be solved, and I look to the army of highly-educated and accomplished junior members to do much good work, not only with the microscope, but in the accumulation of facts in anatomy, physiology, surgery and pathology, metallurgy, and mechanics.

There is ample scope for further research in regard to the

direct and remote influence of nerve-irritation and nerve-sympathy caused by dental lesions, especially during the eruption of the deciduous teeth and the third molars, such as the prevalence of grave mental and physical morbid phenomena such as convulsions, epilepsy, hystero-epilepsy, and other disturbances. There is also much unknown with regard to the prevalence of caries during adolescence, its causes and treatment; then again, the prophylaxis of caries is still far from being a scientific certainty.

We do not know much about the physiology of nerve sensation in tooth substance, and we can at present only theorise as to the zone of pain at the point where the dentine joins the enamel. We are profoundly ignorant as to the true function of the soft fibrils in dentine, and we cannot state with certainty whether any change or none, either of deposition or alteration, takes place in dentine after the complete formation of the tooth.

We are obliged to say that we do not know the exact *modus operandi* of such an apparently simple matter as the growth and eruption of a tooth.

There is a fruitful field for observation in the possible relation of skin diseases with dental caries, and the influence of dental disease on strumous glands wants working out.

We are still inventing fresh explanations, without explaining the true etiology of erosion, and when we say that the soft fibril of Tomes is a mass of protoplasm, possessing all the attributes of that organism in other parts of the body, we are only confessing the utterness of our impotence.

Turning to our practical work, we have not yet discovered a filling possessing the colour and texture of a human tooth, which shall be as lasting as gold and amalgam, and in the

workroom we cannot find out a substance possessing the beauty of so-called continuous-gum, which shall be as easily worked as vulcanite.

So, gentlemen, it seems only too obvious that, as soon as our student days are over, we must begin to learn, and I maintain that the value of an extended education is proportionate exactly, in so far that it only teaches us how to learn. And this is why I am so earnest an advocate of the dental student taking the conjoint diploma and the Fellowship, whenever it lies in his power, for it simply teaches him how to learn.

Then again, gentlemen, there is a topic which is of too controversial a nature to discuss in this address, I mean the proposed higher diploma in dental surgery, but I, for one, should welcome the day when every qualified dental surgeon would regard membership of this Odontological Society as a higher diploma, to be obtained only as the results of some good and original work, and of probity in private and professional life! If need be the hall-mark of royal recognition might be sought, so that the members might be entitled to the proud string of letters after their names—of L.D.S. and M.R.O.S.!

